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BEYER WEAVER & THOMAS, LLPINTELLECTUAL PROPERTY LAW
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FACSIMILE COVER SHEET

July 20, 2004

Receiver: Examiner Lerner, Avraham H- Art Unit 3611
USPTO Central Fax**FAX #:** 703-872-9306**Sender:** Leslie Russell, Patent Secretary for:
Phillip P. Lee**Our Ref. No.:** SHIBP008

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Application No: 10/688,248**Re:** Amendment A**Pages Including Cover Sheet(s):** 12**Fax Contents:** Fax Cover Sheet - 1 Page
Amendment Transmittal - 1 Page
Amendment A - 9 Pages
Replacement Abstract - 1 Page**MESSAGE:****CONFIDENTIALITY NOTE**

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Kimura et al.

Attorney Docket No.: SHIBP008

Application No.: 10/688,243

Examiner: Lerner, Avraham H.

Filing Date: October 16, 2003

Group: 3611

Title: WHEELCHAIR

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being transmitted via facsimile to the U.S. Patent and Trademark Office, Attention: Examiner Lerner, Avraham H. at facsimile telephone number (703) 872-9306 on July 20, 2004.

Printed Name: Leslie Russell

Signed: **AMENDMENT TRANSMITTAL**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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Sir:

Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	18	MINUS	21	0	x 9 = 0.00	x 18 =
Independent Claims	3	MINUS	3	0	x 43 = 0.00	x 86 =
Multiple Dependent Claim Present and Fee Not Previously Paid					\$145.00	\$290.00
Total					\$0.00	\$

- ☐ Applicant(s) hereby petition for a _____ month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. SHIBP008).

Respectfully submitted,
BEYER WEAVER & THOMAS, LLP



Phillip P. Lee
Reg. No. 46,866

P.O. Box 778
Berkeley, CA 94704-0778

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re application of: Noritaka Kimura

Attorney Docket No.: SHIBP008

Application No.: 10/688,248

Examiner: Lerner, Avraham H.

Filed: October 16, 2003

Group: 3611

Title: Wheelchair

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Printed Name: Leslie Russell

Signed: AMENDMENT A

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated June 9, 2004, a response to which is due September 9, 2004 please enter the following amendments and consider the following remarks:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims, which begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.

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